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RECEIVED SEP. 11. 2006 11:01AM OBLON SPIVAK NO. 485 **...** CENTRAL FAX CENTER SEP 1 1 2008 220983450PC INSTEED STATES PATENT AND TRADERIANK DIRECT Board of Patent Appeals and Interferences 2006-2562 Appeal No: Manabu Suhara et al. Appellant: OBLON, SPIVAK, MCCLELLAND, MAIER & 10/089,109 Application No: NEUSTADT, P.C. Hearing Room: R 1940 DUKE STREET Hearing Docket: ALEXANDRIA, VA 22314 Wednesday, October 18, 2006 Hearing Date: 15106 RECEIVED: 09:00 AM Hearing Time: OBLON, SPIVAK, McCLELLAND Madison Building - East Wing Location: MAIER & NEUSTADY, P.C. 600 Dulany Street, 9th Floor DOCKETHIC D Alexandria, Virginia 22313-1450 Initials/Date Docketed: PP9 Type of Resp(s): Conl-Ol NOTICE OF HEARING <u>0-18</u>-06 Due Date(s): 9 - 22 CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon es the argument in one appeal is concluded, the succeeding appear will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquires, please contact the Clerk of the Board at 571-272-9797. CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if feestmile is not available. USPTO Central Fax No: (703) 872-9306 BPAI HEARINGS FAX No: (571) 273-0299 BOARD OF PATENT APPEALS AND INTERFERENCES BPAI Mailing Address: UNITED STATES PATENT AND TRADEMARK OFFICE P.O. BOX 1450 ALEXANDRIA, VIRGINIA 22313-1450. -In all communications relating to this appeal, please identify the appeal by its number. () HEARING ATTENDANCE WAIVED ING ATTENDANCE CONFIRMED Signature of Attorne / Agent/Appellant Names of other visitors expected to accompany counsel:

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